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UNITED STATES BANKRUPTCY COURT Entered 07/18/16 16:38:08 Case 16-22968 Doc 1-1 Filed 07/18/16 attach correct PDF NORTHERN DISTRICT OF ILLINOIS Fill in this information to identify your case: JUL 1 8 2016 United States Bankruptcy Court for the: Northern District of Illinois JEFFREY P. ALLSTEADT, CLERK Case number (If known): _ Chapter you are filing under: Chapter 7 ☐ Chapter 11 Øhapter 12 ☐ Check if this is an Chapter 13 amended filing Official Form 101 Voluntary Petition for Individuals Filing for Bankruptcy 12/15 The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct (if known). Answer every question, Part 1: **Identify Yourself**

information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): 1. Your full name Write the name that is on your MICIC government-issued picture First name First name identification (for example, your driver's license or passport). Middle name Middle name Bring your picture identification to your meeting with the trustee. Suffix (Sr., Jr., II, III) Suffix (Sr., Jr., II, III) 2. All other names you have used in the last 8 First name First name years Middle name Include your married or Middle name maiden names. Last name Last name First name First name Middle name Middle name Last name Last name 3. Only the last 4 digits of xxx - xx - Q Q Q Qyour Social Security number or federal OR Individual Taxpayer 9 xx - xx -9 xx - xx -_____ Identification number (ITIN)

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Debtor 1

MINICICI

WOOds East Name

Case number (if known)_

<u> 2014-00</u>		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers	☐ I have not used any business names or EINs.	have not used any business names or EINs.
	(EIN) you have used in the last 8 years	Business name	Business name
	Include trade names and doing business as names	Business name	Business name
		EIN	EIN
		EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		2905 manroe	
		Number Street	Number Street
		Chicago IL GOG/2 City State ZIP Code COOK	City State ZIP Code
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number Street	Number Street
		P.O. Box	P.O. Box
		City State ZIP Code	City State ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)
			73

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Debtor 1

Case number (if known)_

Part 2:

Tell the Court About Your Bankruptcy Case

7.	The chapter of the Bankruptcy Code you are choosing to file under		uptcy (F oter 7 oter 11 oter 12	a brief description c form 2010)). Also, ç			U.S.C. § 342(b) for Individuals Filing e appropriate box.
8.	How you will pay the fee	local yours subm with nee Apple i req By la less pay t	court for self, you nitting you nitting you not be parted to parte	or more details all any pay with car our payment on y rinted address. The fee in instance in the for Individuals to the fee be was at my fee be was also of the official in installments). I	ash, cashier's ch your behalf, you allments. If you Pay The Filing I ived (You may ot required to, w poverty line tha f you choose thi	ay pay. Typically neck, or money r attorney may p choose this op ree in Installment request this optivative your fee, a to applies to your is option, you m	eck with the clerk's office in your y, if you are paying the fee order. If your attorney is pay with a credit card or check tion, sign and attach the ants (Official Form 103A). It is nonly if you are filing for Chapter 7, and may do so only if your income is a family size and you are unable to ust fill out the Application to Have the with your petition.
9.	Have you filed for bankruptcy within the last 8 years?	Mo ☐ Yes.	District		When	MM / DD / YYYY	Case number Case number Case number
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	No ☐ Yes.	District Debtor		When	MM / DD# / YYYY	Relationship to you Case number, if known Relationship to you Case number, if known
11.	Do you rent your residence?	No. Yes.	residen No. Yes	ur landlord obtained ice? Go to line 12.	ement About an E		and do you want to stay in your Against You (Form 101A) and file it with

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Debtor 1

First Name

WOOKS Last Name

Case number (if known)

2. Are you a sole proprietor of any full- or part-time	No. C	Go to Part 4.				
business?	☐ Yes.	Name and location of bu	siness			
A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or		Name of business, if any Number Street				
LLC. If you have more than one		74371007				
sole proprietorship, use a separate sheet and attach it to this petition.						
to this petition.		City		Stat	e ZIP Coo	le
		Check the appropriate b	ox to describe y	our business:		
		☐ Health Care Busines	s (as defined in	11 U.S.C. § 101(2	27A))	
		☐ Single Asset Real Es	state (as defined	l in 11 U.S.C. § 10	1(51B))	
		☐ Stockbroker (as defir	ned in 11 U.S.C	. § 101(53A))		
		🗖 Commodity Broker (a	as defined in 11	U.S.C. § 101(6))		
		☐ None of the above				
For a definition of small business debtor, see 11 U.S.C. § 101(51D).	☐ No.☐ Yes.	I am not filing under Cha I am filing under Chapter the Bankruptcy Code. I am filing under Chapter Bankruptcy Code.	11, but I am N			
art 4: Report if You Own	or Have	Any Hazardous Prop	erty or Any P	roperty That N	eeds Immedi:	ate Attention
Do you own or have any	M No					
property that poses or is alleged to pose a threat	☐ Yes.	What is the hazard?				
of imminent and identifiable hazard to public health or safety? Or do you own any						
property that needs immediate attention?		If immediate attention is	s needed, why i	s it needed?	***************************************	
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?						
		Where is the property?	Number	Street		
			City		Sta	ate ZIP Code

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Debtor 1

Case number (If known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether vou have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.
 - Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.
- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15

- □ I am not required to receive a briefing about credit counseling because of:
 - ☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- I am not required to receive a briefing about credit counseling because of:
 - ☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 16-22968 Doc 1-1 Filed 07/18/16 Entered 07/18/16 16:38:08 Desc to attach correct PDF Page 6 of 59

Do To School and Job opportunities my Schedule Charged up. your help is highly appreciated thanks.

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Debtor 1

M	KKI

Local	S
Last Name	

Case number (if known)

Pa	rt 6: Answer These Ques	stions for Reporting Purposes	s			
16.	What kind of debts do you have?	as "incurred by an individual	y consumer debts? Consumer del primarily for a personal, family, or hou			
		☐ No. Go to line 16b. ☐ Yes. Go to line 17.				
			y business debts? Business debts estment or through the operation of the			
		□ No. Go to line 16c.□ Yes. Go to line 17.				
		16c. State the type of debts you o	owe that are not consumer debts or bu	isiness debts.		
infallforba	and the state of t	onicona normane e romgo se romano arriva noto a romano antico a noto successivo successivo de termina de situad	allica estados esta esta la locação acidadesta escuela estada estada en en estada en estada en enconocidor en	o-menerum mererum antenem-museu visioum andrakti a visio esik soom esik solitu, min appalement esike diliking masik kahilik atai		
17.	Are you filing under Chapter 7?	No. I am not filing under Cha				
	Do you estimate that after any exempt property is	Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?				
	excluded and administrative expenses	□ No				
Presentation of the Control of the C	are paid that funds will be available for distribution to unsecured creditors?	☐ Yes				
18.	How many creditors do you estimate that you owe?	1-49	1,000-5,000	2 5,001-50,000		
		☐ 50-99 ☐ 100-199	□ 5,001-10,000 □ 10,001-25,000	☐ 50,001-100,000 ☐ More than 100,000		
SPROM HODEL	ka paragaman kelenceran menlenci berdir menlende mendelende dan berjelik bada berjelik bada baja U Kaladah Si A SI	200-999				
19.	How much do you estimate your assets to	△/ \$0-\$50,000 □ \$50,001-\$100,000	☐ \$1,000,001-\$10 million☐ \$10,000,001-\$50 million☐	☐ \$500,000,001-\$1 billion☐ \$1,000,000,001-\$10 billion☐ \$1,000,000,000,001-\$10 billion☐ \$1,000,000,000,001-\$10 billion☐ \$1,000,000,000,000,000,000,000,000,000,0		
	be worth?	\$100,001-\$500,000	\$50,000,001-\$100 million	\$10,000,000,001-\$50 billion		
(Clark transport	opp-emmenteren versteren zueren zueren zueren zonen bestellten zich ein zeit der die der der der der der der d Der emmenteren versteren zueren zueren zueren zueren zueren zu der	□ \$500,001-\$1 million	□ \$100,000,001-\$500 million	More than \$50 billion		
20.	How much do you estimate your liabilities	☑ \$0-\$50,000 □ \$50,001-\$100,000	□ \$1,000,001-\$10 million □ \$10,000,001-\$50 million	□ \$500,000,001-\$1 billion □ \$1,000,000,001-\$10 billion		
	to be?	\$100,001-\$500,000	☐ \$50,000,001-\$100 million	☐ \$10,000,000,001-\$50 billion		
		☐ \$500,001-\$1 million	☐ \$100,000,001-\$500 million	☐ More than \$50 billion		
118	rt 7: Sign Below					
Fo	or you	I have examined this petition, and correct.	d I declare under penalty of perjury tha	it the information provided is true and		
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.				
			I did not pay or agree to pay someone nd read the notice required by 11 U.S.	e who is not an attorney to help me fill out C. § 342(b).		
		I request relief in accordance with	n the chapter of title 11, United States	Code, specified in this petition.		
I understand making a false statement, concealing property, or obtaining money or property b with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, 18 U.S.C. §§ 152, 1341, 1519, and 3571.						
		Signature of Debtor 1	سطان 🗶 📉			
			J	ire of Debtor 2		
		Executed on 07 18 6	AO I O Execute	ed on MM / DD /YYYY		

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Debtor	1	

ml	KICI	Woods
First Name	Middle Name	Last Name

Case number (if known)_____

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

	Date	
Signature of Attorney for Debtor		MM / DD /YYYY
Printed name		
Firm name		
Number Street		
City	State	ZIP Code
Contact phone	Email addre	ess
Bar number	State	

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MIKICI WOO

Case number (if known)_____

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page. The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

Are you aware that filing for bankruptcy is a serious action with long-term financial and lega
consequences?

No-
√ýes

Are you aware that bankruptcy fraud is a serious crime and that if your bankruptcy forms are inaccurate or incomplete, you could be fined or imprisoned?

Ш	No
	/
	100

Did you pay or agree to pay someone who is not an attorney to help you fill out your bankruptcy forms?

	/-
\mathbf{Z}	No

Yes, Name of Person____

Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

By signing here, I acknowledge that I understand the risks involved in filing without an attorney. I have read and understood this notice, and I am aware that filing a bankruptcy case without an attorney may cause me to lose my rights or property if I do not properly handle the case.

Signature of Debtor 1	Signature of De	ebtor 2
Date 07 (8 90) (c	Date	MM / DD /YYYY
Contact phone <u>173-426-2839</u>	Contact phone	
Cell phone 313 - 409 - 9315	Cell phone	
Email address MICICIWOUSS7414019	mail address	

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

In Re:	City of	Chicago)	
	D.14 (1))	Case No.
	Debtor (s)	woods)	Chapter
)	

List of Creditors

City of Chicago parting Irelats Room 121 N. Lasalle Strut 107A Chicago , IL Leono2	·

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Debtor 1	allach correct PDF Page 11 0159				

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Fill in this in	formation to ide	entify your case:	
Debtor 1	MIKICI		woods
Deploi 1	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States I	Bankruptcy Court f	or the: Northern District of Illinois	
Case number			
	(If known)		

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets	
	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$
1ь. Copy line 62, Total personal property, from Schedule A/В	\$
1c. Copy line 63, Total of all property on <i>Schedule A/B</i>	\$
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	\$
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$
Your total liabilities	\$
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$
	эт Ультан бан Анганта жан жан жан жайын жан ал танан Тамантан танатыр 10 мда 1 мг/гата 1 мг/гата 1 мг/гата 1 мг

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Case number (if known)

Case number (if known)

Debtor 1

P	Answer These Questions for Administrative and Statistical Records	
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?	
	No. You have nothing to report on this part of the form. Check this box and submit this form Yes	orm to the court with your other schedules.
7.	What kind of debt do you have?	
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purpose.	individual primarily for a personal, ses. 28 U.S.C. § 159.
	Your debts are not primarily consumer debts. You have nothing to report on this part this form to the court with your other schedules.	of the form. Check this box and submit
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	come from Official \$
9.	Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:	
	From Part 4 on Schedule E/F, copy the following:	
	9a. Domestic support obligations (Copy line 6a.)	\$
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$\$
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$
	9d. Student loans. (Copy line 6f.)	\$
	9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$
	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$
	9g. Total. Add lines 9a through 9f.	\$

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Fill in this in	formation to ident	tify your case and this	s filing:
Debtor 1	MIKIG		Mongs
Daktas	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court for t	he: Northern District of	Illinois
Case number			

Official Form 106A/B

Part 1:

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? 💆 No. Go to Part 2. ☐ Yes. Where is the property? What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put Single-family home the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Duplex or multi-unit building Street address, if available, or other description Condominium or cooperative Current value of the Current value of the entire property? portion you own? Manufactured or mobile home ☐ Land Investment property Describe the nature of your ownership ■ Timeshare ZIP Code City interest (such as fee simple, tenancy by ☐ Other the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only County ☐ Check if this is community property Debtor 1 and Debtor 2 only (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: If you own or have more than one, list here: What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put ■ Single-family home the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. ■ Duplex or multi-unit building Street address, if available, or other description Condominium or cooperative Current value of the Current value of the ■ Manufactured or mobile home entire property? portion you own? Land Investment property Describe the nature of your ownership ■ Timeshare City State ZIP Code interest (such as fee simple, tenancy by the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only

County

Debtor 1 and Debtor 2 only

At least one of the debtors and another

property identification number:

Other information you wish to add about this item, such as local

Debtor 2 only

☐ Check if this is community property

(see instructions)

Debtor 1	Case 16-22968	Doc 1-1 att	Filed 07/18/16 tach correct PDF	Entered 07/18/19 Page 15 of 59 Case number (if ke		sc to
Debioi 1	First Name Middle Name	Last Name		Gass Hamber (IV)	· · · · · · · · · · · · · · · · · · ·	
1.3.	Street address, if available, or other	description	What is the property? C Single-family home Duplex or multi-unit bu Condominium or coope Manufactured or mobil	ilding rative	Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property?	d claims on <i>Schedule D:</i>
	City State	zIP Code	☐ Investment property ☐ Timeshare ☐ Other	the managed 2 Charles	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by
	County		Who has an interest in to Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the debt Other information yours	only	Check if this is co (see instructions)	mmunity property
2. Add t	the dollar value of the portion y have attached for Part 1. Write	ou own for a that number l	property identification r Il of your entries from Par nere	t 1, including any entries	for pages	\$
you own 3. Cars	own, lease, or have legal or eq that someone else drives. If you vigory, vans, trucks, tractors, sport u	uitable intere	e, also report it on <i>Schedul</i>			5
3.1.	Make: Model: Year: Approximate mileage: Other information:		Who has an interest in a ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 ☐ At least one of the debtor	only	entire property?	d claims on Schedule D: ns Secured by Property. Current value of the portion you own?
	u own or have more than one, de	escribe here:	☐ Check if this is cominstructions) Who has an interest in		\$Do not deduct secured cl	\$aims or exemptions. Put
3.2.	Make: Model: Year: Approximate mileage: Other information:		Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the deb	only	the amount of any secure or the amount of any secure Creditors Who Have Clair Current value of the entire property?	d claims on Schedule D: ms Secured by Property.
			☐ Check if this is com instructions)	munity property (see	\$	\$

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	Make:	Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured cla the amount of any secured Creditors Who Have Clain	d claims on Schedule D: ns Secured by Property.
	Year:	Debtor 2 only	Current value of the	Current value of the
		Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Approximate mileage:	At least one of the debtors and another		
	Other information:	☐ Check if this is community property (see	\$	\$
		instructions)	•	
3.4.	Make:	Who has an interest in the property? Check one.	Do not deduct secured cla the amount of any secure	
	Model:	Debtor 1 only	Creditors Who Have Clain	
	Year:	Debtor 2 only	Current value of the	Current value of the
	Approximate mileage:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
		At least one of the debtors and another		
	Other information:	☐ Check if this is community property (see instructions)	\$	\$
□ N □ Y		Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property?	d claims on Schedule D: ns Secured by Property.
		instructions)	· · · · · · · · · · · · · · · · · · ·	
lf yo	own or have more than one, list here:			
If you	Make:	Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured cla the amount of any secure Creditors Who Have Clair	d claims on Schedule D:
-			the amount of any secure Creditors Who Have Clair Current value of the	d claims on Schedule D: ns Secured by Property. Current value of the
-	Make:	Debtor 1 only Debtor 2 only	the amount of any secure Creditors Who Have Clair	d claims on Schedule D: ns Secured by Property.
-	Make: Model: Year:	☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	the amount of any secure Creditors Who Have Clair Current value of the	d claims on Schedule D: ns Secured by Property. Current value of the

Debtor 1

Part 3:	Describe	Your	Personal	and	Household	Item
---------	----------	------	----------	-----	-----------	------

Do	you own or have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Household goods and furnishings	
	Examples: Major appliances, furniture, linens, china, kitchenware	
	Ď No .	
	Yes. Describe,	<u></u>
		\$
7.	Electronics	•
	Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music	
	collections; electronic devices including cell phones, cameras, media players, games	
	Ŭ No	
	Yes. Describe	¢
		Ψ
8.	Collectibles of value	
	Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects;	
	stamp, coin, or baseball card collections, other collections, memorabilia, collectibles	
	W No	1
	☐ Yes. Describe	\$
	Equipment for sports and hobbies	
	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments	
	4	
	□ Yes. Describe	
	G res. Describe	\$
10	Firearms	
10.	Examples: Pistols, rifles, shotguns, ammunition, and related equipment	
	No	
	Yes. Describe	de
		Φ
11.	Clothes	
	Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
	Z No	i
	Yes, Describe	\$
12	Jeweiry	
	Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	
	gold, silver	
	Ď No	
	Yes. Describe	\$
	Non-farm animals	
	Examples: Dogs, cats, birds, horses	
	∑'No P	
	Yes. Describe	\$
14	Any other personal and household items you did not already list, including any health aids you did not list	
	Ď No	
	Yes. Give specific	Φ.
	information,	\$
15	Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached	
	for Part 3. Write that number here	\$

Part 4:

Debtor 1

MICCUA First Name Mid

Describe Your Financial Assets

Middle Name Last Name

Do you own or have any l	egal or equitable interest in	any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
No		ne, in a safe deposit box, and on hand when you f		
— res			Cash:	\$
17. Deposits of money Examples: Checking, so and other sin	avings, or other financial accou milar institutions. If you have m	unts; certificates of deposit; shares in credit unions ultiple accounts with the same institution, list each	s, brokerage houses, h.	
□ Yes		Institution name:		
	17.1. Checking account:		···········	\$
	17.2. Checking account:			\$
	17.3. Savings account:			\$
	17.4, Savings account:			\$
	17.5. Certificates of deposit:			\$
	17.6. Other financial account:			\$
	17.7. Other financial account:			\$
	17.8. Other financial account:			\$
	17.9. Other financial account:			\$
18. Bonds, mutual funds, Examples: Bond funds, No		erage firms, money market accounts		
				\$
				\$
				\$
19. Non-publicly traded so an LLC, partnership, a		rated and unincorporated businesses, includi	ng an interest in	
∑ No	Name of entity:		% of ownership:	
Yes. Give specific information about			0% %	\$
them			0% %	\$
			70	\$

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irst Name Middle Name	Last Name	
Milder	Unitial Correct PDF	Page 19 of 59
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20. Government and corpo Negotiable instruments i Non-negotiable instrume			
No No			
Yes. Give specific information about	Issuer name:		
them			\$
			\$
			\$
No Yes. List each	RA, ERISA, Keogh, 40	01(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
account separately.	Type of account:	Institution name:	
	401(k) or similar plan:		\$
	Pension plan:		\$
	IRA:		\$
	Retirement account:		\$
			\$
	Keogh:		
	Additional account:		\$
	Additional account:		\$
companies, or others	with landlords, prepai	d rent, public utilities (electric, gas, water), telecommunications	
₩ No □ Yes		Pl. C	
☐ Yes		titution name or individual:	
	Electric:		\$
	Gas:		\$
	Heating oil:		\$
	• ,	tal unit:	\$
	Prepaid rent:		\$
	Telephone:		\$
	Water;		\$
	Rented furniture:		\$
	Other:		\$
. /	or a periodic payment o	of money to you, either for life or for a number of years)	
☑ No			r.
☐ Yes	Issuer name and des	cription:	
			\$
			\$
			\$

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Ou	30 ± 0
6 A (Will
V V	11 1.00
, ,	

24 Interests in an adjusation IPA in	in an accoun	at in a qualified ABLE program, or under a qualified	Letate tuition program	
26 U.S.C. §§ 530(b)(1), 529A(b),			state tuition program.	
∑ ∕No				
Yesln	Institution nam	ne and description. Separately file the records of any ir	nterests.11 U.S.C. § 521(c):
				\$
_				\$
_				\$
5. Trusts, equitable or future inter exercisable for your benefit	rests in prop	perty (other than anything listed in line 1), and right	ts or powers	
No				
Yes. Give specific			PPARTICIPAL CONTROL CONTROL AND THE PROPERTY AND THE PROP	
information about them				\$
				erend.
		rets, and other intellectual property proceeds from royalties and licensing agreements		
₽ N°		, , , , ,		
Yes. Give specific	Anadominat material and controlled a should reply Production of the		anta in controlle al recur a la mana accine le la cultura la manta e tial ville e la Ni	COLOR V
information about them	70.770.00.770.00.00.00.70.70.70.70.00.00			\$
7. Licenses, franchises, and other	or aonoral int	tangibles		
,	_	s, cooperative association holdings, liquor licenses, pre	ofessional licenses	
D √No				
Yes. Give specific	المستوافقة والمستوان المراجع والمستوافقة والمستوان المستوان والمستوان والمستوان والمستوان والمستوان والمستوان		ink (NETTING (1997) TO NOTE (1997) THE SECTION OF THE SECTION OF PRODUCT LIVE AND A LIVE AND A SECTION OF THE S	nuary
information about them				\$
Money or property owed to you?				
noney or property owed to you:				Current value of the portion you own?
	uig grana iki giras.	Barrier Communication of the C	•	Do not deduct secured claims or exemptions.
8. Tax refunds owed to you				
No				
Yes. Give specific information			Federal:	\$
about them, including wh you already filed the retu			State:	\$
and the tax years			Local:	\$
	INELECCION CO		out of the	
9. Family support				
	n alimony, spc	ousal support, child support, maintenance, divorce sett	llement, property settleme	ent
` □ V No	Lawrence		navonom	
Yes. Give specific information	n		Alimony:	\$
			Maintenance:	\$
			Support:	\$
			Divorce settlement:	\$
			Property settlement:	\$
	ility insurance	payments, disability benefits, sick pay, vacation pay, ans you made to someone else	workers' compensation,	
No	ponalistic			whay
Yes. Give specific information	ın			•
	1			: U

First Name

31. Interests in insurance policies			
. /	ce; health savings account (F	ISA); credit, homeowner's, or renter's insurance	
∑ No			
Yes. Name the insurance company of each policy and list its value	Company name:	Beneficiary:	Surrender or refund value:
			\$
		······································	\$
			¢
			Ψ
32. Any interest in property that is due you If you are the beneficiary of a living trust, e property because someone has died.	from someone who has die xpect proceeds from a life ins	ed surance policy, or are currently entitled to receive	
¹☑ No			
☐ Yes. Give specific information			
			\$
			,
33. Claims against third parties, whether or Examples: Accidents, employment dispute			
_	1		ernoy
☐ Yes. Describe each claim			\$
34. Other contingent and unliquidated claim to set off claims			
Ù No r	Essentia cum en como en en estado en tentro de elevera e en eleva y elevação, y electros de modernos de modernos.		mts.
Yes. Describe each claim			\$
Į.			Ψ
35. Any financial assets you did not already	/ list		
No	entre en entre en monte en entre en proposition de la company de la comp		·····]
Yes. Give specific information			
Tes. Give specific information			\$
36. Add the dollar value of all of your entries			
for Part 4. Write that number here	***************************************	—	\$
Part 5: Describe Any Business-	Deleted Drenerty Voy	Own or Have an Interest in. List any r	ool octato in Part 1
Describe Any Business-	Related Property Tou	Own or have an interest in. List any i	earestate iii Fart 1.
37. Do you own or have any legal or equital	ble interest in any husiness	-related property?	
1. 2/-	morest in any business		
☐ Yes. Go to line 38.			The state of the s
			Current value of the
			portion you own?
			Do not deduct secured claims or exemptions.
			·
38. Accounts receivable or commissions ye	ou already earned		
Ŵ No			- 1
Yes, Describe			h
The propagation of the state of	**************************************		p
39. Office equipment, furnishings, and sup	plies		
Examples: Business-related computers, software	e, modems, printers, copiers, fax	machines, rugs, telephones, desks, chairs, electronic devices	i e
` ☑ No			
☐ Yes. Describe	CONTRACTOR (CONTRACTOR CONTRACTOR		•
	VORTER TO THE TOTAL AND A STATE AND A STAT		J*
SETTING AND			

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40. N	lachinery, fixtures, equipment, supplies yo	ou use in business, and tools of your trade		
0	u√ _{No}			
	Yes. Describe		1900-19-19-19-19-19-19-19-19-19-19-19-19-19-	
	/			
41. lr	nventory			
	HI INO			
Ļ	Yes. Describe	AND ROLL AND		\$
	I majaya takan ya	was to the contract of the con		ond.
42. i r	nterests in partnerships or joint ventures			
Ţ	9 No			
Į	Yes. Describe Name of entity:		% of ownership:	
			%	¢
			%	\$
			~^ %	\$
				Ψ
43. Q	ustomer lists, mailing lists, or other comp	oilations		
	od∕ No			
Į.	🛾 Yes. Do your lists include personally id	entifiable information (as defined in 11 U.S.C. § 101(41A	.))?	
	□ No			
	Yes. Describe			•
				\$
44.	ny business-related property you did not		arrite arre acceptorative in host final referencing a final city () Arrite this of the inhundred of the advanta	IAAI
	No	aneauy nst		
	☐ Yes. Give specific			•
	information			\$
				\$
				\$
				\$
	******			¢
				Ψ
				<u>\$</u>
45. F	add the dollar value of all of your entries fo	rom Part 5, including any entries for pages you have at	tached	•
				Φ
e e e vocama	99 0489994 2009 9521 1994 902 145 14 5 7 15 7 15 7 15 11 15 1 15 15 15 15 15 15 15 15 15 1	Sees assemble sees ees ees sees see as as a see as a see an announcement meet were were were were well were ve	sanoma monoco dono e e e e e e e e e e e e e e e e e e	a. Selventia e dibilitari con menangan sama ang panganan ang ang ang ang ang ang ang ang
Par		nercial Fishing-Related Property You Own or Ha	ive an Interest Ir).
	If you own or have an interest in fa	armland, list it in Part 1.		
•	1	interest in any farm- or commercial fishing-related pro	perty?	
Ĺ	No. Go to Part 7.			
Ę	Yes. Go to line 47.			
				Current value of the portion you own?
				Do not deduct secured claims
	. /			or exemptions.
	arm animals			
	Examples: Livestock, poultry, farm-raised fish			
	No produce and the second of t		and the section of th	· _i
ļ	Yes			
				s

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48. Crops—either growing or harvested	
Yes. Give specific information	\$
49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade	
☑ No	Tellar
Yes	
	\$
50. Farm and fishing supplies, chemicals, and feed	
☑ No □ Yes	Nawy
	\$
51. Any farm- and commercial fishing-related property you did not already list	and t
☑ No	······································
Yes. Give specific information	\$
52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached	
for Part 6. Write that number here	\$
Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above	
53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership	
₩ No	
Yes. Give specific information	\$
momation	\$
	Ψ
54. Add the dollar value of all of your entries from Part 7. Write that number here	\$
Part 8: List the Totals of Each Part of this Form	
ES Porte. Total and retain the Dec 9	. ()
55. Part 1: Total real estate, line 2	*
56. Part 2: Total vehicles, line 5	
57. Part 3: Total personal and household items, line 15	
58. Part 4: Total financial assets, line 36 \$	
59. Part 5: Total business-related property, line 45	
60. Part 6: Total farm- and fishing-related property, line 52	
61. Part 7: Total other property not listed, line 54	
62. Total personal property. Add lines 56 through 61	+\$
63. Total of all property on Schedule A/B. Add line 55 + line 62	\$

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Fill in this information to identify your case:						
Debtor 1	First Name	Middle Name	Wast Name			
Debtor 2	First Name	Middle Name	Last Name			
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the: Northern District of Illinois						
Case number (If known)						

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Par	t 1: Identify the Property You Claim	as Exempt				
ĺ	Which set of exemptions are you claiming? ☐ You are claiming state and federal nonbant ☐ You are claiming federal exemptions. 11 U	kruptcy exemptions. 11				
2. F	or any property you list on Schedule A/B t	nat you claim as exem	pt, fill in the information below.			
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption		
		Copy the value from Schedule A/B	Check only one box for each exemption.			
1	Brief description:	\$	\$			
	Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit			
	Brief description:	\$	□ \$			
	Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit			
1	Brief description:	\$				
	Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit			
3. Are you claiming a homestead exemption of more than \$160,375?						
(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) 'I No /						
	Yes. Did you acquire the property covered No	by the exemption within	1,215 days before you filed this case?			
	☐ Yes					

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Case number (# known)

Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:	_ \$	□ \$	
Line from Schedule A/B:	(a)	☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	_ \$	□ \$	
Line from Schedule A/B: ———		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	_ \$	Q \$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	_ \$	= \$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	_ \$		
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	_ \$	□ \$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	_ \$		
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	_ \$		
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	_ \$		
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	_ \$		
Line from Schedule A/B:	t D. 1580 (1580) Date Date (1515) de la montabrila com montable del colonia de la colo	☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		. 🖵 \$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief	\$		
description: Line from Schedule A/B:	-	100% of fair market value, up to any applicable statutory limit	

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	attach correct PDF Page 26 ()T 59		
Fill in this information to identify your ca	ise:			
Debtor 1	wards			
	a Name Last Name			
Debtor 2 (Spouse, if filing) First Name Middle	e Name Last Name			
United States Bankruptcy Court for the: Norther	n District of Illinois			
Case number				
(If known)			Check amend	f this is an
			amend	a ming
Official Form 106D				
	rs Who Have Claims Secu	rod by Pro	nortv	40/45
			·	12/15
	e. If two married people are filing together, both are py the Additional Page, fill it out, number the entrie			
additional pages, write your name and c		0, 1,,,,,		,
1. Do any creditors have claims secured	hy vour property?			
	orm to the court with your other schedules. You have no	thing else to report on	this form.	
Yes. Fill in all of the information below	N.			
Part 1: List All Secured Claims		Column A	Column B	Column C
	more than one secured claim, list the creditor separate	Column A y Amount of claim	Value of collateral	Unsecured
	has a particular claim, list the other creditors in Part 2. phabetical order according to the creditor's name.	Do not deduct the value of collateral.	that supports this claim	portion
•		yaloe oi collateral.		If any
2.1	Describe the property that secures the claim:		\$	\$
Creditor's Name				
Number Street				
	As of the date you file, the claim is: Check all that app Contingent	oly.		
	☐ Unliquidated			
City State ZIP Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secure	d		
☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐	car loan) Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset)			
community debt				
Date debt was incurred	Last 4 digits of account number			
Creditor's Name	Describe the property that secures the claim:	\$	_ \$	\$
Creditol S Maine				
Number Street				
	As of the date you file, the claim is: Check all that ap Contingent	ply.		
	☐ Unliquidated			
City State ZIP Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secure	ed		
Debtor 2 only Debtor 1 and Debtor 2 only	car loan) Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset)			
community debt				
Date debt was incurred	Last 4 digits of account number	(ASSESSED AND AND AND AND AND AND AND AND AND AN		
Add the dollar value of your entries it	n Column A on this page. Write that number here:	P	1	

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Case number (if known)

Case number (if known)

Debtor 1

Part 1: After listing any entries on this p by 2.4, and so forth.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any	
	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name				
Number Street				
	As of the date you file, the claim is: Check all that apply.	•		
	Contingent			
City State ZIP Code	☐ Unliquidated☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	 An agreement you made (such as mortgage or secured car loan) 			
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset)	-		
community debt				
Date debt was incurred	Last 4 digits of account number	kiig kiis 311 - Amerita Aren programmen medineroren medineroren planskatik Jarolia (hill kirikiski kiliki	andra Lle e alle dat e la serie de la s	uncanci renega a memerine renegamente di accidi (1800 data).
	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name				
Number Street		1		
	As of the date you file, the claim is: Check all that apply. ☐ Contingent			
	Unliquidated			
City State ZIP Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)			
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit			
	Other (including a right to offset)			
 Check if this claim relates to a community debt 	, <u>, , , , , , , , , , , , , , , , , , </u>	-		
Date debt was incurred	Last 4 digits of account number	TOTAL CONTROL OF THE SALE (AND SALES AND SALES	and the second s	
	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name]		
Number Street				
	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent			
City State ZIP Code	☐ Unliquidated☐ Disputed☐			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only	☐ An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit			
At least one of the debtors and another	Other (including a right to offset)	_		
☐ Check if this claim relates to a community debt				
Date debt was incurred	Last 4 digits of account number	***************************************	1	
Add the dollar value of your entrie	s in Column A on this page. Write that number here:	\$		
If this is the last page of your form Write that number here:	, add the dollar value totals from all pages.	\$		

attach correct PDF Page 28 of 59

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Debtor 1

Case number (# known)_

	First Name	Middle Name	Last Name
Part 2:	List Other	s to Be Notified	for a Debt That You Already Listed

				On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
Number	Street			_
				_
				_
City	rreger gregor i grego e esperimentaria das aveniras de electrol	State	ZIP Code	
				On which line in Part 1 did you enter the creditor?
lame				Last 4 digits of account number
Number	Street			-
				_
Dity		State	ZIP Code	_
magamananan sere				On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
				-
Number	Street			
				-
City		State	ZIP Code	_
l sedición de puerre se conserve en esc				On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
Number	Street			
runibel	Oncor			
				_
City	Harring and History of Supergraphics William Profession in American	State	ZIP Code	
			200 July 100	On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
Number	Street			_
		1.00		_
				_
City	Applicative Application to produce the program of the production o	State	ZIP Code	
				On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
Number	Street	Note: 1		_
				_

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Fill in this in	nformation to iden	itify your case:	e 29 01 39		
Debtor 1	First Name	Middle Name	WW Z S		
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name		
United States	Bankruptcy Court for	the: Northern District of	Illinois	·	☐ Check if this is an
Case number (If known)					amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Pai	tt 1: List All of Your PRIORITY Unsecure	ed Claims				
2.	 Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) 					
		i	Total claim	Priority amount	Nonpriority amount	
2.1	Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$	
	Number Street	When was the debt incurred?			: :	
	City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify		utrastrá livia e remonatolivia e surivas su su	signated before the except of our authorities of Venezia who color	
2.2	Priority Creditor's Name	Last 4 digits of account number	\$. \$	\$	
	Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated				
	Is the claim subject to offset? ☐ No ☐ Yes	Other. Specify				

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Page 30eofn59 (ir known)_

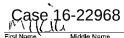
Part 1: Your PRIORITY Unsecured Claims — Continuation Page Nonpriority After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth. Total claim Priority Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Street Number As of the date you file, the claim is: Check all that apply. Contingent ■ Unliquidated City State ZIP Code Disputed Who incurred the debt? Check one. Type of PRIORITY unsecured claim: ☐ Debtor 1 only Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were intoxicated Check if this claim is for a community debt Other. Specify Is the claim subject to offset? ☐ No ☐ Yes Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated City State ZIP Code □ Disputed Who incurred the debt? Check one. Type of PRIORITY unsecured claim: Debtor 1 only Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only ☐ Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were intoxicated ☐ Check if this claim is for a community debt Other. Specify Is the claim subject to offset? ☐ No ☐ Yes \$ \$ Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent ZIP Code Unliquidated □ Disputed Who incurred the debt? Check one. Type of PRIORITY unsecured claim: Debtor 1 only Debtor 2 only ■ Domestic support obligations ■ Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another ☐ Claims for death or personal injury while you were intoxicated ☐ Check if this claim is for a community debt □ Other. Specify Is the claim subject to offset? ☐ No

Yes

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Part 2: List All of Your NONPRIORITY Unsecured Claims

			-
	Do any creditors have nonpriority unsecured claims against you No. You have nothing to report in this part. Submit this form to the Yes	e court with your other schedules.	LLOCAL DELLOCATION OF THE PROPERTY OF THE PROP
	List all of your nonpriority unsecured claims in the alphabetical on nonpriority unsecured claim, list the creditor separately for each claim included in Part 1. If more than one creditor holds a particular claim, I claims fill out the Continuation Page of Part 2.	n. For each claim listed, identify what type of claim it is. Do not I	list claims already 🔠
			Total claim
4.1		Last 4 digits of account number	
	Nonpriority Creditor's Name	When was the debt incurred?	\$i
	Number Street		A CONTRACTOR OF THE CONTRACTOR
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.	**A-ATTERNOONA-
		☐ Contingent	
	Who incurred the debt? Check one.	☐ Unliquidated	-
	Debtor 1 only	☐ Disputed	
	Debtor 2 only		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans	
	ACTUAL ONE OF the deptote and another		Annual An
	Check if this claim is for a community debt	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	WWW.
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
	^ /	Other. Specify	
	Ū∕ _{No}	Other, Specify	
	☐ Yes		
4.2		Last 4 digits of account number	\$
4.2		When was the debt incurred?	
	Nonpriority Creditor's Name	Wileli was the dept incured:	
		m.	- Company
	Number Street	As of the date you file, the claim is: Check all that apply.	wydiniejs.Wedi
	City State ZIP Code	- D. Cardinaant	The state of the s
İ	oly	☐ Contingent	No.
	Who incurred the debt? Check one.	Unliquidated	WW-7723-11
	Debtor 1 only	☐ Disputed	i
1	Debtor 2 only	T (NONDRIODITY was a sum of a lating	ļ
1	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student ioans	
	☐ Check if this claim is for a community debt	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	U _{II}
		Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other, Specify	
	₽ No		
	Yes		
4.3	AND WASHINGTON TO THE RESIDENCE OF THE PROPERTY OF THE PROPERT	Last 4 digits of account number	
	Nonpriority Creditor's Name	When was the debt incurred?	\$
		_	•
	Number Street		
	7100-4-	 As of the date you file, the claim is: Check all that apply. 	
	City State ZIP Code	D. Outforest	
İ	Who incurred the debt? Check one.	Contingent	
	Debtor 1 only	Unliquidated	
	•	☐ Disputed	
-	Debtor 2 only		
}	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	•
	At least one of the debtors and another	☐ Student loans	
-	☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce	
	Is the claim subject to offset?	that you did not report as priority claims	
	D No	Debts to pension or profit-sharing plans, and other similar debts	•
	Yes	Other. Specify	
	- 163		



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Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

Afte	r listing any entries on this page, number them beginning	with 4.4, followed by 4.5, and so forth.	Total claim
		Last 4 digits of account number	\$
	Nonpriority Creditor's Name	When was the debt incurred?	T
	Number Street	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	Contingent Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	☐ Disputed	
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loansObligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify	
	□ No □ Yes		
		Last 4 digits of account number	**************************************
	Nonpriority Creditor's Name	When was the debt incurred?	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	☐ Contingent ☐ Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	☐ Debtor 1 only ☐ Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ Debtor 1 and Debtor 2 only	☐ Student loans	
	At least one of the debtors and another	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify	
	Yes		
		Last 4 digits of account number	\$
	Nonpriority Creditor's Name	When was the debt incurred?	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	☐ Contingent ☐ Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	Wallion and the same of the sa
	Debtor 1 only	Type of NONDDIODITY upposited daims	
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim: Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	T and the state of
	☐ Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify	A. Common and Angelonia
	□ No □ Yes		
	La res		Management and the second and the se

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Part 3:

List Others to Be Notified About a Debt That You Already Listed

		On which entry in Part 1 or Part 2 did you list the original creditor?
Name	•	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber Street		Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
		Last 4 digits of account number
City non-responsibility equation (representation) (representation) (representation) (representation) (representation)	State State Service of the control	IP Code
Name		On which entry in Part 1 or Part 2 did you list the original creditor?
		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street		☐ Part 2: Creditors with Nonpriority Unsecured Claims
City	State	P Code Last 4 digits of account number
etterinterinterinterinterintetisterintetisterintetisterintetisterinterinterinterinterinterinterinterin	r opperty i gravny repulser stansky repulser operalisty 2000 S. Jakobski delikiologi (2000 Bisholosi Sibbedalista)	On which entry in Part 1 or Part 2 did you list the original creditor?
Name		
Number Street		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
		Claims Claims
216.	State	Last 4 digits of account number
City nada o escencia escencia necesimente escentivos escen	State	On which entry in Part 1 or Part 2 did you list the original creditor?
lame		
Number Street		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
14.11.D31		Part 2: Creditors with Nonpriority Unsecured Claims
		Last 4 digits of account number
City usaaneen oo taasa badan tarroo oo aan ah oo oo ah oo oo ah oo oo ah oo oo ah oo oo ah oo oo ah oo oo ah oo oo a	State State	IP Code
Name		On which entry in Part 1 or Part 2 did you list the original creditor?
		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street		Part 2: Creditors with Nonpriority Unsecured Claims
City paperpasses to the property of the paperpasses of the paperpasses to the paperpasses of the paperpasses	State State	Last 4 digits of account number
Name		On which entry in Part 1 or Part 2 did you list the original creditor?
raile		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street		☐ Part 2: Creditors with Nonpriority Unsecured
		Claims
City	State	Last 4 digits of account number
oo Saada ka Saadaa Saadaa Saadaa Koo oo ah koo oo ah koo oo ah koo oo ah koo oo ah koo oo ah koo oo ah koo oo a	egeneratet fan in it fûndste wegener ûnder earde ûnder het dippetit voorpe de provinste de ste broeken de ste b	On which entry in Part 1 or Part 2 did you list the original creditor?
Name		
Number Street		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
		Claims
City	Ctota	□ Last 4 digits of account number
City	State :	

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Desc to

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

6a

6d.

Total claim

Total claims from Part 1

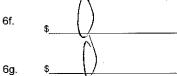
- 6a. Domestic support obligations
- 6b. Taxes and certain other debts you owe the government
- Claims for death or personal injury while you were intoxicated
- 6d. Other. Add all other priority unsecured claims. Write that amount here.
- 6e. Total. Add lines 6a through 6d.

- \$_____
- 6b. _{\$____}
- 6c. <u>\$</u>
- 6e.

Total claims from Part 2

- 6f. Student loans
- 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- 6h. Debts to pension or profit-sharing plans, and other similar debts
- Other. Add all other nonpriority unsecured claims.
 Write that amount here.
- 6j. Total. Add lines 6f through 6i.

Total claim



- 6h. c
- 6i. + s
- 6j. \$_____

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		ana	.cii concet i Di	1 agc 33 01 33	
Fill in thi	is information to ide	ntify your case:			
D-64	inmlag		1.5008		
Debtor	First Name	Middle Name	Last Name	—	
Debtor 2 (Spouse If fi	iling) First Name	Middle Name	Last Name	<u>·</u>	
		r the: Northern District of I			
United Sta	ates Bankruptcy Court to	fille, Northern District of t	IIIIOIS		
Case num (If known)	nber				Check if this is ar
					amended filing
Officia	al Form 1060	3			
Saha	dula Ci Ex	— vocutory Col	ntracte and	Unexpired Leases	12/15
JCIIE	dule G. LA	ecutory con	itiacts and	Oliexpired Leases	12/13
nformatic additional	on. If more space is I pages, write your n	needed, copy the addition name and case number (pry contracts or unexpir	onal page, fill it out, nun if known). ed leases?	ether, both are equally responsible for sunber the entries, and attach it to this page les. You have nothing else to report on this	e. On the top of any
☐ Y	es. Fill in all of the inf	ormation below even if the	e contracts or leases are	isted on Schedule A/B: Property (Official Fo	rm 106A/B).
2 lists	enarately each nere	on or company with wh	om you have the contra	ct or lease. Then state what each contrac	t or lease is for (for
exam	pple, rent, vehicle lea pired leases.	ase, cell phone). See the	instructions for this form	in the instruction booklet for more examples	of executory contracts and
				that is a second of the	BANGARA SERVE NE S
Pers	on or company with	whom you have the cor	ntract or lease	State what the contract or lease is	s for
Wat 23 /g	,				
2.1					
Name	3				
Manuel	- Ctroot				
Numb	per Street				
City	1980 F 1	State ZIP Code			
2.2	and and an analysis of the second second second second second second second second second second second second	le per de le periodic de communication au representation de propriét de paper de la communication de la coloni	. Адамов 1950 но водо од 25. дод врсто од примен раз досто страно в го заводо од ₁₉₆		and the state of the state of the state of the state of the state of the state of the state of the state of the
Name					
Hame	-				
Numb	ber Street				
Other		State ZIP Code			
2.3 City		State ZIP Code	en distribution de destados destados destados de combinencia con compresentamente como como con como consecuen		
Name	9				
Numb	per Street				
City		State ZIP Code			
2.4					
Name	e				
Numl	ber Street				
Num	Dei Greet				
City		State ZIP Code			
2.5					
Name	e	400			
Numl	ber Street				
City		State ZIP Code			
Oity		Julia 211 0006			

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Debtor 1

Case number (if known)_



Official Form 106G

Additional Page if You Have More Contracts or Leases

	Person or	company wi	th whom you	have the contract	t or lease	What the contract or lease is for
2. <u>2</u>						
	Name					-
	Number	Street				-
-	City		State	ZIP Code		-
2	ing of decide of the real states of the	eta aretgioni arginerare engliste e filipete d'indigi i d	nen vitt 1927 til til tillflåre i anderne menne manne	ur engage, econode se qual de quel PHE E August 1948 E E Epitalia, e	ed for free factors of each and an additional reservoir estimates assessed	
	Name					-
80.00 A TOTAL CO.	Number	Street				-
	City		State	ZIP Code	** ************************************	-
2	57-03 (50) FT Province Verties	ga aya garay ay galar sa salada da salada da sala	ukkee-kiiraber suuresi verti Vira-vira-ke	ng gyest et am tipaka natus naman kalanti kathiri kathiri kathiri		
ļJ	Name					-
(Andrewson) of the state of the	Number	Street				- .
a-yearrafindosconomicosco	City		State	ZIP Code		_
2					ezetendi ünlirleri ilkizinkelilikisi ettilikisisi	
<u> </u>	Name					_
- Adams	Number	Street				
		Jueet				_
	City		State	ZIP Code	en syngaleer onderlydd dei hallo fol ei hallon d 1990 y 1991 o 1991 o 1991 o 1991 o 1991 o 1991 o 1991 o 1991	
2	-					_
	Name					_
	Number	Street				
	City		State	ZIP Code		
2						
	Name					_
	Number	Street				_
	City		State	ZIP Code		_
2	grafing regression and annual regression and		туучул он ууулгарар банысты ашаласыбан андаг Род от	e de la come de la trada estructiva de la come destructura de come de come de come de come de come de come de c	graphocathaeannaiseannaileannailea (1980) (1989) (1989)	
البسيسا	Name				1.1.00	<u>-</u>
	Number	Street				_
	City		State	ZIP Code		_
2	netotiniste it in er toe eustan.	may mammananaya in Amerika (1,01) (1, 1,01) (1,	1.400 a Principal Principal Strategics of Commission Co	en energiste konstrukk (konst 1 konstruk 1 skolova V konstru transmi	त्तरं त्या श्रहतं द्वाकावार क्राव्यक्ततं अञ्चलकत् विकासकृता स्वर्णकाम् प्रति स्वराणकाः हो स्वराधी है तेव	
	Name					
Annual various to the terminal of the terminal	Number	Street				_
PARLAMENTAL AND AND AND AND AND AND AND AND AND AND			01-1-	710 0-1-		_
Logicalist in	City	gangagagagananggagagaan, to condit 4 h (4) f	State	ZIP Code	a gagangga agawa pomograma mana magaman magama magama.	

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Debtor 1	milaci		Manga			
Debior 1	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States	Bankruptcy Court for	the: Northern District of I	llinois			
Case number(If known)						

☐ Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1 Yes	
Jithin the last 8 years, have you lived in a community property state or territo rizena, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Wa	
No. Go to line 3.	
Yes. Did your spouse, former spouse, or legal equivalent live with you at the tim	16?
No	Fill in the name and autrant address of that name
☐ Yes. In which community state or territory did you live?	Fill in the name and current address of that person.
Name of your spouse, former spouse, or legal equivalent	
Number Street	
City State ZIP Code	
Column 1, list all of your codebtors. Do not include your spouse as a codeb	
Column 1: Your codebtor	Check all pepedules that apply
	Check all schedules that apply:
Name	Schedule D, line
Name	☐ Schedule E/F, line
Number Street	☐ Schedule G, line
City State ZiP Code	
	Schedule D, line
Name	Schedule E/F, line
Number Street	☐ Schedule G, line
700-	
City State ZIP Code	
Nome	Schedule D, line
Name	Schedule D, line
Name Number Street	

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Debtor 1

Case number (if known)_

Additional Page to List More Codebtors

	Column 1:	Your codebtor			Colu	mn 2: The creditor to whom you owe the	debt
					Che	ck all schedules that apply:	
3					_ 🗆	Schedule D, line	
	Name					Schedule E/F, line	
	No-to-	Stroot				Schedule G, line	
	Number	Street					
i L	City		State	ZIP Code	_		
3			***************************************			у 1975 г. – 1973 г. п. У. п. Макерина (простоя при при при при при при при при при при	
	Name				_ 🗆	Schedule D, line	
						Schedule E/F, line	
	Number	Street			- 	Schedule G, line	
L.,.	City		State	ZIP Code	enancemental and the second		
3						0.4 11 0.5	
H	Name					Schedule D, line	
						Schedule E/F, line	
	Number	Street			- ш	Schedule G, line	
, , , , , , , , , , , , , , , , , , ,							
<u> </u>	City		State	ZIP Code			
3						Schedule D, line	
J	Name						
eliman) (present)						Schedule E/F, line	
	Number	Street				Schedule G, line	
1					_		
	City		State	ZIP Code			and to take and the above the
3	•				_ 🗖	Schedule D, line	
over all the second	Name					Schedule E/F, line	
	Number	Street				Schedule G, line	
The state of the s	Number	Street					
-	City		State	ZIP Code	_		
3	mandain Enter Herrin 1970	\$ 17.00 \$ 2.5 1.5 25 0 0 \$ 1.5 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	COLON COLON NOS EL SER ESTADO CONTRACTOR A MANDIO CONTRACTOR A MAN	Maria de la Contra de Contra de Contra de Contra de Contra de Contra de Contra de Contra de Contra de Contra d	***************************************		
	Name				_ 🗆	Schedule D, line	
-						Schedule E/F, line	
	Number	Street			- 	Schedule G, line	
<u></u>	City	C 4 (4 (4 (4 (4 (4 (4 (4 (4 (4 (State	ZIP Code		$p_{2} p_{2} p_{2} p_{2} p_{3} p_{4} p_{3} p_{4} p_{4} p_{4} p_{4} p_{5} p_{4} p_{5} p_{4} p_{5} p_{4} p_{5} p_{4} p_{5} p_{4} p_{5}	MAYS SCIENCE IS REAS AFFRES
3					П	Schedule D, line	
	Name						
						Schedule E/F, line	
	Number	Street				Schedule G, line	
					_		
3	City	and the second s	State	ZIP Code	t de Maria de Como do Como Carterio	yynys ymytyy y charactau y maeth an ar ar ar ar ar ar ar ar ar ar ar ar ar	
						Schedule D, line	
	Name					Schedule E/F, line	
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.	Number	Street					
	City		State	ZIP Code	_		
(nonconvenient	eponomialista anun en un mere.	ed eveloping to the house to the market and the company of the com	endown to respect to the contract of the contr	CONCERNO CONTENTO CO	wojenowortjouwzymomani acom	\$	month included the mander of contact

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Fill in this information to identify	your case:				
Debtor 1 MIKIC		11500 de			
First Name Debtor 2	Middle Name	Last Name			
(Spouse, if filing) First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:	Northern District of Illinois				
			Ch	eck if this is:	
(If known)				An amended filing	
				A supplement showing perincome as of the following	
Official Form 106l				MM / DD / YYYY	
Schedule I: You	r Income				12/15
Be as complete and accurate as posupplying correct information. If you figure to the separate and your spouseparate sheet to this form. On the	ou are married and not fili ise is not filing with you, o top of any additional pag	ing jointly, and yo do not include infe	our spouse is living formation about you	g with you, include informa our spouse. If more space i	ation about your spouse. is needed, attach a
Fill in your employment information.		Debtor 1		Debtor 2 or no	n-filing spouse
If you have more than one job, attach a separate page with information about additional employers.	Employment status	☐ Employed ☐ Not employe		☐ Employed ☐ Not employe	ed
Include part-time, seasonal, or self-employed work.					
Occupation may include student or homemaker, if it applies.	Occupation	•			
	Employer's name				* HILL HOUSE AND
	Employer's address				
		Number Street		Number Street	
		City	State ZIP Code	City	State ZIP Code
	How long employed the	,		•	
	now long omproyed are		-		
Part 2: Give Details About	Monthly Income				
Estimate monthly income as of spouse unless you are separated If you or your non-filing spouse ha	ave more than one employe	er, combine the info			
below. If you need more space, a	ttach a separate sheet to the	nis form.	4		
			For Deb	tor 1 For Debtor 2 or non-filing spou	
List monthly gross wages, sal deductions). If not paid monthly,	ary, and commissions (be calculate what the monthly	efore all payroll y wage would be.	2. \$.	_
3. Estimate and list monthly over	rtime pay.		3. +\$	+ \$	_
4. Calculate gross income. Add li	ne 2 + line 3.		4. \$ ()	\$	_

Official Form 106l Schedule I: Your Income page 1

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Debtor 1

	, <i>P</i>	allacii coiieci
WK	101	12015
First Name	Middle Name	beet Name

Case number (if known)

		Fo	r Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here	→ 4.	\$_	0	sa sauces and the control of the con	
5. List all payroll deductions:			A		
5a. Tax, Medicare, and Social Security deductions	5a.	æ	\cup	\$	W. HERMAN, M.
5b. Mandatory contributions for retirement plans	5b.	Ψ	à	- Ψ <u></u>	THE PARTY OF THE P
5c. Voluntary contributions for retirement plans	5c.	Ψ_ \$		- Ψ	
·	5d.	\$_ \$		- Ψ	
5d. Required repayments of retirement fund loans		Ψ_ \$		_ Ψ <u></u>	Transport of
5e. Insurance	5e.	Φ_		_ φ	
5f. Domestic support obligations	5f.	ф		Φ	
5g. Union dues	5g.	Φ	V	Φ	TELL TOP TOP TOP TOP TOP TOP TOP TOP TOP TOP
5h. Other deductions. Specify:	5h.	+\$_		_ + \$	
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h	. 6.	\$_	0	\$	- Language and American
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_		\$	
8. List all other income regularly received:					
8a. Net income from rental property and from operating a business, profession, or farm					I man water of the second of t
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total			Q		
monthly net income.	8a.	\$	<u> </u>		
8b. Interest and dividends	8b.	\$_	0	\$	
8c. Family support payments that you, a non-filing spouse, or a depend regularly receive	lent		δ) Ο		
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$_	0	\$	
8d. Unemployment compensation	8d.	\$	<u> </u>	\$	
8e. Social Security	8e.	\$	-6-	\$	
8f. Other government assistance that you regularly receive			V		111111111111111111111111111111111111111
Include cash assistance and the value (if known) of any non-cash assistation that you receive, such as food stamps (benefits under the Supplemental	ince		75		
Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	()	\$	
•	•	-	N	· · · · · · · · · · · · · · · · · · ·	
8g. Pension or retirement income	8g.	\$_	<u>`</u>	<u> </u>	
8h. Other monthly income. Specify:	8h.	+\$_	0	+\$	
9. Add all other income . Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$_	0	\$	
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10	\$_	0	+ \$=	\$
11. State all other regular contributions to the expenses that you list in Scholinclude contributions from an unmarried partner, members of your household, friends or relatives.			dents, your ro	ommates, and other	
Do not include any amounts already included in lines 2-10 or amounts that are					
Specify:				11. +	Φ
12. Add the amount in the last column of line 10 to the amount in line 11. Th Write that amount on the Summary of Your Assets and Liabilities and Certain					\$Combined monthly income
13. Do you expect an increase or decrease within the year after you file this No.	form	?			
Yes. Explain:					

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Fill in this information to identify your ca	ase:				
Debtor 1 YWWW	Word	8			
First Name Middle	e Name Last Name	Check if this			
Debtor 2 (Spouse, if filing) First Name Middle	e Name Last Name	———		_	
United States Bankruptcy Court for the: Norther	n District of Illinois			howing postr the following	petition chapter 13 date:
Case number				_	
(If known)					
Official Form 106J					
Schedule J: Your E	xpenses				12/15
Be as complete and accurate as possible. information. If more space is needed, atta (if known). Answer every question.	ch another sheet to this form				-
Part 1: Describe Your Household	<u> </u>				
1. Is this a joint case?					
No. Go to line 2. Yes. Does Debtor 2 live in a separate	e household?				
₩ No					
☐ Yes. Debtor 2 must file Officia	Form 106J-2, Expenses for S	eparate Household of Debtor 2.	and the same of the same of the		
2. Do you have dependents? Do not list Debtor 1 and	o es. Fill out this information for	Dependent's relationship to Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?
	es. Fili out this information for ach dependent	MINISTER AND TO THE PROPERTY OF THE PROPERTY O	1 00	19c	
Do not state the dependents' names.			_		□ No □ Yes
names.					□ No
			_		☐ Yes
			_		☐ No
					Yes
					U No □ Yes
					□ No
					Yes
3. Do your expenses include expenses of people other than yourself and your dependents?	*				
manta anti-rando mata manta de esta manta terra contra esta de esta esta esta en el contra en el comente mente Contra en esta en esta en entre en entre en entre en entre en entre en entre en entre en entre en entre entre e	ana mining periode and a series and a series and a series and a series and a series and a series and a series	1884 (S. 1894 S. 1886 A. 1886 A. 1886 A. 1886 A. 1894 A. 1886 A. 1886 A. 1886 A. 1886 A. 1886 A. 1886 A. 1886 A	umunular i kirili amada ida	A. Vis Are a controlle at Vacaritation and Controlle at Armyr p.ve.	manuscripturament olikus must valentiete siere vers operatiete verstook vers vers operatiete vers operatiete s
Part 2: Estimate Your Ongoing Mo				<u> </u>	
Estimate your expenses as of your bankruptor expenses as of a date after the bankruptor applicable date.					·
Include expenses paid for with non-cash	government assistance if you	know the value of			And the second second
such assistance and have included it on S	-	•		Your expe	1808 Angunana
 The rental or home ownership expense any rent for the ground or lot. 	es for your residence. Include	first mortgage payments and	4.	\$	<u>) </u>
If not included in line 4:					Ô
4a. Real estate taxes			4a.	\$	
4b. Property, homeowner's, or renter's			4b.	\$	<u> </u>
4c. Home maintenance, repair, and upk	•		4c.	\$	<u> </u>
4d Homeowner's association or condo	minium dues		4d	\$	()

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Debtor 1

MIK	W	(Noa ys	
iset Manas	Middle Name	1 act Name	

Case number (if known)

			Your expenses
		C Kris	\$ <i>\tilde\text{\tince{\text{\texict{\text{\tert{\text{\text{\text{\text{\text{\texitil{\text{\text{\text{\texictex{\text{\text{\text{\text{\texict{\texit{\texict{\texit{\texi{\text{\texict{\texict{\texit{\texit{\texict{\texitint{\texit{\terimtex{\texit{\texi{\texi{\texit{\texi{\texi{\texi{\texi{\texic</i>
5.	Additional mortgage payments for your residence, such as home equity loans	5.	
6.	Utilities:		A
	6a. Electricity, heat, natural gas	6a.	\$
	6b. Water, sewer, garbage collection	6b.	\$
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$
	6d. Other. Specify:	6d.	\$
7.	Food and housekeeping supplies	7.	\$
8.	Childcare and children's education costs	8.	\$
9.	Clothing, laundry, and dry cleaning	9,	\$
10.	Personal care products and services	10.	\$
11.	Medical and dental expenses	11.	\$
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$ 0
13,	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$
14.	Charitable contributions and religious donations	14.	\$ <u></u>
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	\$
	15b. Health insurance	15b.	s
	15c. Vehicle insurance	15c.	\$()
	15d. Other insurance, Specify:	15d.	\$()
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$
47			
17.	Installment or lease payments:	17a.	\$
	17a. Car payments for Vehicle 1	17b.	\$
	17b. Car payments for Vehicle 2	17c.	\$ (2)
	17c. Other. Specify:	17d.	\$ ()
	17d. Other. Specify:	iru.	¥
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$
19.	Other payments you make to support others who do not live with you.		\bigcirc
	Specify:	19.	\$
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom		. 0
	20a. Mortgages on other property	20a.	3
	20b. Real estate taxes	20b.	\$
	20c. Property, homeowner's, or renter's insurance	20c.	\$
	20d. Maintenance, repair, and upkeep expenses	20d.	\$\$
	20e. Homeowner's association or condominium dues	20e.	\$

Entered 07/18/16 16:38:08 attach correct PDF Page 43 of 59 Debtor 1 Case number (if known) Other. Specify: Calculate your monthly expenses. 22a. Add lines 4 through 21. 22a. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22b. 22c. Add line 22a and 22b. The result is your monthly expenses. 22c 23. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. 23b. Copy your monthly expenses from line 22c above. 23b. Subtract your monthly expenses from your monthly income. 23c. The result is your monthly net income. 23c 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your

Filed 07/18/16

Case 16-22968

Doc 1-1

mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

∰No. Yes.

Explain here:

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Fill in this	information to identify	your case:					
Debtor 1	maga		Weids	Check if t	hie ie:		
Debtor 2	First Name	Middle Name	Last Name		nended filing	~	
(Spouse, if fili		Middle Name	Last Name			~	petition chapter 13
United State	es Bankruptcy Court for the:	Northern District of Illinois				ne following	
Case numb (If known)	er			ММ / С	DD / YYYY	-	
Official	Form 106J-2						
		xpenses for	Sepai	rate Household	of De	∍btor 2	2 12/15
Debtor 2 ha	eve one or more depend respect to expenses for l	lents in common, list the o Debtor 2 that are not repor is form. On the top of any	dependents rted on Sci	btor 1 and Debtor 2 maintain s on both Schedule J and this hedule J. Be as complete and pages, write your name and	form. Ans laccurate a	swer the que s possible. I	estions on this form If more space is
1. Doyoua	nd Debtor 1 maintain se	eparate households?					
Ŭ No □ Ye	o. Do not complete this for s	rm.					
2. Do you h	ave dependents?	**************************************	Paidin and a share would do the Pane of A State of East	NACA MANAYAN KIR MEMPANYAN KANTA BARTA KAMPANA MANAYAN MANAYAN MEMBANYAN MENANGAN MEMBANYAN MEMBANYAN MEMBANYA	THE A CONTRACTOR SHOWING STREET, SHOWING THE STREET, SHOWING THE STREET, SHOWING THE STREET, SHOWING THE STREET,	CONTROL OFFICE OF A PARTY CONTROL OF A PARTY CONTRO	
-	t Debtor 1 but list all	Yes. Fill out this infor	mation for	Dependent's relationship to Debtor 2:	De ag	ependent's e	Does dependent live with you?
regardles	endents of Debtor 2 s of whether listed as a	each dependent		te destinate del mande desti de del conserva de destina est de la conserva de la conserva de la conserva de la	elektrick besterrich	almati (alistica esta esta esta esta esta esta esta est	No
depender Schedule	nt of Debtor 1 on J.				······································		☐ Yes
Do not st	ate the dependents'						No D
names.	·						Yes Do No
							☐ Yes
							☑ No
							☐ Yes
							□ No
***************************************							☐ Yes
expense	expenses include s of people other than your dependents, and ?	Mo ☐ Yes	dan silan na kana na kana na kana na kana na kana na kana na kana na kana na kana na kana na kana na kana na k	wak wantoo kalamaa waka o foodaa ahaa ka	estant appet assume spensor	er det s week en state til state en en state e	ustas askala kalentaria kalentaria kalentaria kalentaria kalentaria kalentaria kalentaria kalentaria kalentari
Part 2:	Estimate Your Ongoi	ing Monthly Expenses					
Estimate ye	our expenses as of your		iless you a	re using this form as a suppl	ement in a C	Chapter 13 c	ase to report
Implieda aver	anasa naid far with nor	n-cash government assist	ones if you	know the value of			
-	•	d it on S <i>chedule I: Your In</i>	-			Your expe	nses
	tal or home ownership of for the ground or lot.	expenses for your residen	ce. Include	first mortgage payments and	4.	\$	
	cluded in line 4:					. ()	
4a. Re	al estate taxes				4a.	\$	
4b. Pro	pperty, homeowner's, or r	renter's insurance			4b.	\$	<u>) </u>
4c. Ho	me maintenance, repair,	and upkeep expenses			4c.	\$()
4d Ho	meowner's association o	r condominium dues			4d.	\$ 1	3

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Debtor 1

	۵.	/i
as A	ilase	1. Crode
1/1	HELEN	
First Name	Middle Name	Last Name

Case number (if known)_

			Your expenses
		res	superioristico successivo e reconsidera internativa de la companio del companio de la companio de la companio del companio de la companio del la companio del la companio de la companio de la companio de la companio de la companio de la companio de la companio de la companio de la companio de la companio de la companio de la companio de la companio del la companio del la companio de la companio del la compan
5.	Additional mortgage payments for your residence, such as home equity loans	5.	
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a.	\$
	6b. Water, sewer, garbage collection	6b.	\$
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$
	6d. Other. Specify:	6d.	\$
7.	Food and housekeeping supplies	7.	\$
8.	Childcare and children's education costs	8.	\$
9.	Clothing, laundry, and dry cleaning	9.	\$()
10.	Personal care products and services	10.	\$ <u> </u>
11.	Medical and dental expenses	11.	\$()
12.	Transportation. Include gas, maintenance, bus or train fare.		\$
	Do not include car payments.	12.	. 0
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$
14.	Charitable contributions and religious donations	14.	\$
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
			• ()
	15a. Life insurance	15a.	\$
	15b. Health insurance	15b.	\$
	15c. Vehicle insurance	15c.	\$
	15d. Other insurance. Specify:	15 d .	\$
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		\wedge
	Specify:	16.	\$
17.	Installment or lease payments:		<i>(</i> 4)
	17a. Car payments for Vehicle 1	17a.	\$ <u>()</u>
	17b. Car payments for Vehicle 2	17b.	\$
:	17c. Other. Specify:	17c.	\$
	17d. Other. Specify:	17d.	\$
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from		À
	your pay on line 5, Schedule I, Your Income (Official Form 106I).	18,	\$()
19.	Other payments you make to support others who do not live with you.		Z=`\
	Specify:	19.	\$
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	ne.	
	20a. Mortgages on other property	20a.	\$
	20b. Real estate taxes	20b.	<u>\$</u>
	20c. Property, homeowner's, or renter's insurance	20c.	\$
	20d. Maintenance, repair, and upkeep expenses	20d.	\$
	20e. Homeowner's association or condominium dues	20e.	\$

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Del	otor 1	YW KAME WICH Case number (If known list Name Last Name	n)			
21. 22.	The result	thly expenses. Add lines 5 through 21. is the monthly expenses of Debtor 2. Copy the result to line 22b of Schedule J to calculate the ises for Debtor 1 and Debtor 2.	21.	+\$	0	
23,	Line not us	ed on this form.				
	D	and an increase or decrease in your expenses within the year after you file this form?				
	For examp	ect an increase or decrease in your expenses within the year after you file this form? e, do you expect to finish paying for your car loan within the year or do you expect your ayment to increase or decrease because of a modification to the terms of your mortgage?				
:	V i No. □ Yes.	Explain here:	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	A COSTO MARTINES AND AND AND	anders and measurements are a measurement for the other than 1888 of the 1888 of the 1888 of the 1888 of the 1888 of the 1889 of the 1880 of the 1880 of the 1880 of the 1880	

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Fill in this inform	mation to identify y	our case:		
Debtor 1	MM (CVII)	Middle Name	Last Name	
Debtor 2 (Spouse, if filing) First	st Name	Middle Name	Last Name	
United States Bank	kruptcy Court for the: N	lorthern District of	Illinois	
Case number				
(1.11.011.)		nds-		

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT an	attorney to help you fill out bankruptcy forms?
☑ No ☐ Yes. Name of person	. Attach Bankruptcy Petition Preparer's Notice, Declaration, and
	Signature (Official Form 119).
Under penalty of perjury, I declare that I have read the that they are true and correct.	e summary and schedules filed with this declaration and
100	
* morn wouds	x
Signature of Debtor 1	Signature of Debtor 2
Date OT 18 2016	Date

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Fill in this in	formation to identi	fy your case:	
Debtor 1	MICIG First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court for the	e: Northern District of I	llinois
Case number (If known)	and place in the		

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1:

Give Details About Your Marital Status and Where You Lived Before

Φ	ing the last 3 years, have No Yes. List all of the places					
	Debtor 1:		Dates Debtor 1 lived there	Debtor 2:	NA NA	Dates Debtor 2 lived there
				Same as Debtor 1		Same as Debtor 1
	Number Street		From To	Number Street		From To
	City	State ZIP Code	THE LIBERT TO THE CONTRACT OF STREET	City	State ZIP Code	. 11 11 11 11 . I . I . I . I I I I
				☐ Same as Debtor 1		Same as Debtor 1
	Number Street		From To	Number Street		From To
	City	State ZIP Code	_	City	State ZIP Code	

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otor 1	M I KIEL First Name Middle Name LaSTN	ruds	Case nu	mber (if known)	
Fill If y	I you have any income from employment in the total amount of income you received on are filing a joint case and you have inconvolved inconvolved in the details.	l from all jobs and all busir	nesses, including part-ti	me activities.	dar years?
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross Income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions ar exclusions)
	From January 1 of current year until the date you filed for bankruptcy:	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
	with a magnification of the second of the state of the second of the se	- and see the search and a second control of the	green of the entering of the entering of the state of the		esseration de la competation.
	For last calendar year:	Wages, commissions, bonuses, tips	\$	Wages, commissions, bonuses, tips	\$
	(January 1 to December 31,)	Operating a business		Operating a business	Sacratian de la contraction de
	For the calendar year before that:	Wages, commissions, bonuses, tips		Wages, commissions, bonuses, tips	
	(January 1 to December 31,	Operating a business	\$	Operating a business	\$
-	mbling and lottery winnings. If you are filing at each source and the gross income from each No Yes, Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of Income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions are exclusions)
	From January 1 of current year until		\$		\$
	the date you filed for bankruptcy:		\$		
			\$		\$
					\$ \$
	For last calendar year:		\$		\$\$ \$\$
	(January 1 to December 31,)		\$ \$		\$ \$ \$ \$
	•		\$ \$		\$\$ \$\$ \$\$
	(January 1 to December 31,)		\$ \$ \$		\$\$ \$\$ \$\$
	(January 1 to December 31,)		\$\$ \$\$ \$\$		\$\$ \$\$ \$\$

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Debtor 1

m	lab	
Piecet Marrie	Middle Name	

La Colombia
Case number (if known)

/							
re eithe	er Debtor 1's or Debt	or 2's debt	s primarily co	nsumer debt	s?		
No.	Neither Debtor 1 no	r Debtor 2 h dual primari	has primarily ly for a person	consumer de al, family, or h	bts. Consumer debts ar ousehold purpose."	e defined in 11 U.S.C. § 101	(8) as
	•				ay any creditor a total of	\$6,425* or more?	
	¹☐ No. Go to line 7.						
	Yes, List below en	t you paid th	at creditor. Do	not include p	\$6,425* or more in one a ayments for domestic su ments to an attorney for t	or more payments and the apport obligations, such as this bankruptcy case.	
	• •		=			fter the date of adjustment.	
l vos	Debtor 1 or Debtor 2	2 or both h:	avo primarily	concumer de	hte		
					ay any creditor a total of	\$600 or more?	
	. /	51010 you m	ou for builting	(O)	.,, . ,	•	
	No. Go to line 7.						
	creditor. Do	not include	payments for	domestic supp	\$600 or more and the to port obligations, such as ey for this bankruptcy ca	otal amount you paid that child support and see.	
				Dates of payment	Total amount paid	Amount you still owe	Was this payment for
					\$	\$	☐ Mortgage
•	Creditor's Name				Ψ		Car
							Credit card
							Loan repayment
	Number Street						
	Number Street						• •
	Number Street						Suppliers or vendo
	Number Street City	State	ZIP Code				Suppliers or vendo
		State	ZIP Code				☐ Suppliers or vendo
	City	State	ZIP Code		\$		☐ Suppliers or vendo ☐ Other ☐ Mortgage
		State	ZIP Code		s		☐ Suppliers or vendo ☐ Other ☐ Mortgage ☐ Car
	City	State	ZIP Code		\$	\$	Suppliers or vendo
	City Creditor's Name	State	ZIP Code		s		□ Suppliers or vendo □ Other □ Mortgage □ Car □ Credit card □ Loan repayment
	City Creditor's Name	State	ZIP Code		\$	\$	□ Suppliers or vendo □ Other □ Mortgage □ Car □ Credit card □ Loan repayment □ Suppliers or vendo
	Creditor's Name Number Street				\$	\$	□ Suppliers or vendo □ Other □ Mortgage □ Car □ Credit card □ Loan repayment □ Suppliers or vendo
	Creditor's Name Number Street City	State	ZIP Code		\$	\$	□ Suppliers or vendo □ Other □ Mortgage □ Car □ Credit card □ Loan repayment □ Suppliers or vendo
	Creditor's Name Number Street City	State			of the management of the state	. II JII VII II BUUST EEN AM KA B BUAALBI	□ Suppliers or vendo □ Other □ Mortgage □ Car □ Credit card □ Loan repayment □ Suppliers or vendo □ Other
	Creditor's Name Number Street City	State	ZIP Code		\$		□ Suppliers or vendo □ Other □ Mortgage □ Car □ Credit card □ Loan repayment □ Suppliers or vendo □ Other
	Creditor's Name Number Street City	State	ZIP Code		of the management of the state	. II JII VII II BUUST EEN AM KA B BUAALBI	Suppliers or vendor Other Mortgage Car Credit card Loan repayment Suppliers or vendor Other Mortgage Car
	Creditor's Name Number Street City	State	ZIP Code		of the management of the state	. II JII VII II BUUST EEN AM KA B BUAALBI	□ Suppliers or vendo □ Other □ Mortgage □ Car □ Credit card □ Loan repayment □ Suppliers or vendo □ Other
	Creditor's Name Number Street City Creditor's Name	State	ZIP Code		of the management of the state	. II JII VII II BUUST EEN AM KA B BUAALBI	Suppliers or vendor Other Mortgage Car Credit card Loan repayment Suppliers or vendor Other Mortgage Car
	Creditor's Name Number Street City Creditor's Name	State	ZIP Code		of the management of the state	. II JII WII II BUURT EEMEEN KAI B BUAALBII	Suppliers or vendor Other Mortgage Car Credit card Loan repayment Suppliers or vendor Other Mortgage Car Credit card

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	First Name Middle Name	Last Name	,		Case number (if known)_	
or nt,	1 1 year before you filed for busting include your relatives; any gations of which you are an official including one for a business yes child support and alimony. S. List all payments to an inside	general partners; re icer, director, perso you operate as a so	latives of any on in control, or	general partners; partners; partners; partners	artnerships of which nore of their voting	n you are a general partner; securities; and any managing
	o. Elocum paginionio lo um mon-		Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Īr	nsider's Name			\$	\$	
N	lumber Street					
_						
	Sity St	ate ZIP Code		\$	\$	V. V. V. V. V. V. V. V. V. V. V. V. V. V
h	nsider's Name			¥		
ī	lumber Street					
7	City St	tate ZIP Code				
ins ud	n 1 year before you filed for l sider? e payments on debts guarant			payments or trans	fer any property o	n account of a debt that benefited
-	o es. List all payments that bene	fited an insider.				
-		fited an insider.	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment include creditor's name
Υe		fited an insider.				
Ύє	es. List all payments that bene	ifited an insider.		paid	owe	
Ύє	es. List all payments that bene nsider's Name Number Street	efited an insider.		paid	owe	
Υe	es. List all payments that bene nsider's Name Number Street			paid	owe	
Ĭ	es. List all payments that bene			paid	owe \$	

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Debtor	4

MIAU First Name

Case number (# known)_

nd obntract disputes.	al injury cases,	e you a party in any la small claims actions, di	wsuit, court action, or a vorces, collection suits, pa	aministrative proce aternity actions, supp	eaing? port or custody modificati
No					
Yes. Fill in the details.					
	Natur	e of the case	Court or agency		Status of the case
Case title			Court Name		—— Pending
					On appeal
			Number Street		Concluded
Case number					
			City	State ZIP Code	
×					
Case title			Court Name		—— Pending
	and the second s				On appeal
			Number Street		Concluded
Case number					
			City	State ZIP Code	
No. Go to line 11. Yes. Fill in the information below.		Departies the proposed		Dato	Value of the property
		Describe the proper		Date	Value of the propert
Yes. Fill in the information below.			7	Date	Value of the propert
	. 1.1. -		7	Date	
Yes. Fill in the information below.				Date	
Yes. Fill in the information below. Creditor's Name		Explain what happe	ned is it.	Date	
Yes. Fill in the information below. Creditor's Name			ned repossessed.	Date	
Yes. Fill in the information below. Creditor's Name		Explain what happe	ned repossessed. foreclosed.	Date	
Yes. Fill in the information below. Creditor's Name	e ZIP Code	Explain what happe Property was Property was Property was	ned repossessed. foreclosed.		
Yes. Fill in the information below. Creditor's Name Number Street	e ZIP Code	Explain what happe Property was Property was Property was	ned repossessed. foreclosed. garnished. attached, seized, or levied		
Yes. Fill in the information below. Creditor's Name Number Street	e ZIP Code	Explain what happe Property was Property was Property was Property was Property was	ned repossessed. foreclosed. garnished. attached, seized, or levied	1.	
Yes. Fill in the information below. Creditor's Name Number Street	e ZIP Code	Explain what happe Property was Property was Property was Property was Property was	ned repossessed. foreclosed. garnished. attached, seized, or levied	1.	
Yes. Fill in the information below. Creditor's Name Number Street	e ZIP Code	Explain what happe Property was Property was Property was Property was Property was	ned repossessed. foreclosed. garnished. attached, seized, or levied	1.	Value of the property \$ Value of the property
Yes. Fill in the information below. Creditor's Name Number Street City State	e ZIP Code	Explain what happe Property was Property was Property was Property was Property was	ned repossessed. foreclosed. garnished. attached, seized, or levied	1.	\$
Yes. Fill in the information below. Creditor's Name Number Street City State	e ZIP Code	Explain what happe Property was Property was Property was Property was Property was	ned repossessed. foreclosed. garnished. attached, seized, or levied	1.	\$
Yes. Fill in the information below. Creditor's Name Number Street City State Creditor's Name	e ZIP Code	Explain what happe Property was Property was Property was Property was Describe the property	ned repossessed. foreclosed. garnished. attached, seized, or levied ty	1.	\$
Yes. Fill in the information below. Creditor's Name Number Street City State Creditor's Name	e ZIP Code	Explain what happe Property was Property was Property was Property was Describe the property Explain what happe	ned repossessed. foreclosed. garnished. attached, seized, or levied ty ned	1.	\$
Yes. Fill in the information below. Creditor's Name Number Street City State Creditor's Name	e ZIP Code	Explain what happe Property was Property was Property was Property was Describe the property	ned repossessed. foreclosed. garnished. attached, seized, or levied ty ned repossessed. foreclosed.	1.	

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	First Name Middle Name	Last Name	»Ac	Case number (#known)_		
cour No	nts or refuse to make a pay	ment becau		ng a bank or financial institut	tion, set off an	
			Describe the netton the orean	or toon		
Cred	ditor's Name			alamitikala (1-10-alah 2-1-11-alah alah 180-alah alah 180-alah 180-alah alah 180-alah was taken		
Cred Num					was taken	\$
	nber Street	ZIP Code	Last 4 digits of account num	ıber: XXXX	was taken	\$
Num City	nber Street State	bankruptcy,	was any of your property	nber: XXXXin the possession of an assig		\ <u>\</u>

Part 5: **List Certain Gifts and Contributions**

Yes, Fill in the details for each gift.					
Gifts with a total value of more than \$600 per person	Describe the gifts	and A A had the statement of the stateme		Dates you gave the gifts	Value
Person to Whom You Gave the Gift					\$
Number Street					¥ <u></u>
City State ZIP Code					
Person's relationship to you	, Avenue (1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1			e de la companya de l	
Gifts with a total value of more than \$600 per person	Describe the gifts	en al anti-service de la companya de		Dates you gave the gifts	Value
Person to Whom You Gave the Gift					\$
			÷		\$
Number Street					

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in 2 years before you filed for bankr	uptcy, did you give any gifts or contributions with a total valu	e of more than \$	6600 to any charity
/ No			
Yes. Fill in the details for each gift or co	ontribution.		
Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
		9	
Charity's Name			\$
	_		\$
Number Street			
City State ZIP Code			
List Certain Losses			
	uptcy or since you filed for bankruptcy, did you lose anything	because of thef	t, fire, other
hin 1 year before you filed for bankru	uptcy or since you filed for bankruptcy, did you lose anything	because of thef	t, fire, other
	uptcy or since you filed for bankruptcy, did you lose anything	because of thef	t, fire, other
hin 1 year before you filed for bankru aster, or gambling? No	uptcy or since you filed for bankruptcy, did you lose anything	because of thef	t, fire, other
hin 1 year before you filed for bankru aster, or gambling? No Yes. Fill in the details.	uptcy or since you filed for bankruptcy, did you lose anything Describe any Insurance coverage for the loss	Date of your	Value of proper
hin 1 year before you filed for bankru aster, or gambling? No Yes. Fill in the details.	. Seed to the seed of the seed	eg e	e a ve
hin 1 year before you filed for bankru aster, or gambling? No Yes. Fill in the details.	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance	Date of your	Value of proper
hin 1 year before you filed for bankru aster, or gambling? No Yes. Fill in the details.	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance	Date of your	Value of proper
hin 1 year before you filed for bankru aster, or gambling? No Yes. Fill in the details.	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your	Value of proper
hin 1 year before you filed for bankru aster, or gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your	Value of proper
hin 1 year before you filed for bankru aster, or gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of proper lost
hin 1 year before you filed for bankruaster, or gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred List Certain Payments or Trainin 1 year before you filed for bankrust consulted about seeking bankrupto	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. ansfers uptcy, did you or anyone else acting on your behalf pay or tracy or preparing a bankruptcy petition?	Date of your loss	Value of proper lost
hin 1 year before you filed for bankruaster, or gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred List Certain Payments or Trainin 1 year before you filed for bankruate any attorneys, bankruptcy petition	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. ansfers uptcy, did you or anyone else acting on your behalf pay or tra	Date of your loss	Value of proper lost
hin 1 year before you filed for bankru aster, or gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred List Certain Payments or Trainin 1 year before you filed for bankru consulted about seeking bankrupto ude any attorneys, bankruptcy petition	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. ansfers uptcy, did you or anyone else acting on your behalf pay or tracy or preparing a bankruptcy petition?	Date of your loss	Value of proper lost
hin 1 year before you filed for bankruaster, or gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred List Certain Payments or Trainin 1 year before you filed for bankruate any attorneys, bankruptcy petition	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. ansfers uptcy, did you or anyone else acting on your behalf pay or tracy or preparing a bankruptcy petition? preparers, or credit counseling agencies for services required in y	Date of your loss nsfer any prope our bankruptcy.	Value of proper lost \$
hin 1 year before you filed for bankru aster, or gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred List Certain Payments or Trainin 1 year before you filed for bankru consulted about seeking bankrupto ude any attorneys, bankruptcy petition	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. ansfers uptcy, did you or anyone else acting on your behalf pay or tracy or preparing a bankruptcy petition? preparers, or credit counseling agencies for services required in y	nsfer any properour bankruptcy. Date payment of transfer was	Value of proper lost \$ rty to anyone
hin 1 year before you filed for bankru aster, or gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred List Certain Payments or Trainin 1 year before you filed for bankru consulted about seeking bankrupto ude any attorneys, bankruptcy petition	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. ansfers uptcy, did you or anyone else acting on your behalf pay or tracy or preparing a bankruptcy petition? preparers, or credit counseling agencies for services required in y	Date of your loss nsfer any prope our bankruptcy.	Value of proper lost \$
hin 1 year before you filed for bankru aster, or gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred List Certain Payments or Trainin 1 year before you filed for bankru consulted about seeking bankrupto yde any attorneys, bankruptcy petition No Yes. Fill in the details.	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. ansfers uptcy, did you or anyone else acting on your behalf pay or tracy or preparing a bankruptcy petition? preparers, or credit counseling agencies for services required in y	nsfer any properour bankruptcy. Date payment of transfer was	Value of proper lost \$
hin 1 year before you filed for bankruster, or gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred List Certain Payments or Trainin 1 year before you filed for bankruster consulted about seeking bankrupter ude any attorneys, bankruptcy petition No Yes. Fill in the details. Person Who Was Paid	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. ansfers uptcy, did you or anyone else acting on your behalf pay or tracy or preparing a bankruptcy petition? preparers, or credit counseling agencies for services required in y	nsfer any properour bankruptcy. Date payment of transfer was	Value of proper lost \$

Email or website address

Person Who Made the Payment, if Not You

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or 1	First Name Middle Name Last	RUSS	Case number (if known)_		
и		Description and value of any property tra	unsferred	Date payment or transfer was made	Amount of payment
	Person Who Was Paid				\$
	Number Street				\$
	City State ZIP Code	-			
	Email or website address	_			
	Person Who Made the Payment, if Not You				
\overline{A}	not include any payment or transfer that y No Yes. Fill in the details.	you listed on line 16.	itors?		
Ā	No	you listed on line 16. Description and value of any property tra	a _{re} in the second	Date payment or	Amount of paym
Ā	No Yes. Fill in the details.	enger, or o	a _{re} in the second	Date payment or transfer was made	Amount of paym
Ā	No	enger, or o	a _{re} in the second	transfer was	Amount of paym
Ā	No Yes. Fill in the details.	enger, or o	a _{re} in the second	transfer was	Amount of paym
Ā	No Yes. Fill in the details. Person Who Was Paid	enger, or o	a _{re} in the second	transfer was	Amount of paym \$
Ā	No Yes. Fill in the details. Person Who Was Paid	enger, or o	a _{re} in the second	transfer was	Amount of paym \$ \$
. With	No Yes. Fill in the details. Person Who Was Paid Number Street City State ZIP Code thin 2 years before you filed for bankru	Description and value of any property tra	ansferred	transfer was made	\$ \$
. With	No Yes. Fill in the details. Person Who Was Paid Number Street City State ZIP Code thin 2 years before you filed for bankru insferred in the ordinary course of your	Description and value of any property tra	ansferred ransfer any property	transfer was made	\$an property
. With training loop	No Yes. Fill in the details. Person Who Was Paid Number Street City State ZIP Code thin 2 years before you filed for bankru insferred in the ordinary course of your lude both outright transfers and transfers foot include gifts and transfers that you have	Description and value of any property tra	ansferred ransfer any property	transfer was made	\$an property
Witter Incl. Do.	No Yes. Fill in the details. Person Who Was Paid Number Street City State ZIP Code chin 2 years before you filed for bankru insferred in the ordinary course of your lude both outright transfers and transfers	Description and value of any property tra-	ansferred ransfer any property	transfer was made to anyone, other the mortgage on your pro	\$an property
Witter Incl. Do.	No Yes. Fill in the details. Person Who Was Paid Number Street City State ZIP Code thin 2 years before you filed for bankru insferred in the ordinary course of your lude both outright transfers and transfers mot include gifts and transfers that you have	Description and value of any property tra	ransfer any property a security interest or	transfer was made to anyone, other the mortgage on your pro	operty).
Witter Incl. Do.	No Yes. Fill in the details. Person Who Was Paid Number Street City State ZIP Code thin 2 years before you filed for bankru insferred in the ordinary course of your lude both outright transfers and transfers mot include gifts and transfers that you have	Description and value of any property tra- pletcy, did you sell, trade, or otherwise to business or financial affairs? made as security (such as the granting of ave already listed on this statement.	ransferred ransfer any property a security interest or Describe any propert	transfer was made to anyone, other the mortgage on your pro	\$an property operty).
Witter Incl. Do.	No Yes. Fill in the details. Person Who Was Paid Number Street City State ZIP Code thin 2 years before you filed for bankru insferred in the ordinary course of your lude both outright transfers and transfers not include gifts and transfers that you have No Yes. Fill in the details.	Description and value of any property tra- pletcy, did you sell, trade, or otherwise to business or financial affairs? made as security (such as the granting of ave already listed on this statement.	ransferred ransfer any property a security interest or Describe any propert	transfer was made to anyone, other the mortgage on your pro	\$an property operty).

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Dobtor	

1 1 1 1 1	()	1 NOVAC	Case number (if known)
First Name	Middle Name	Last Name	

Mo				
Yes. Fill in the details.				
	D 1 (1) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	-tt		Date transfer
	Description and value of the prope	ny transferred		was made
	City Deliberation and advantagement of the Control			
Name of trust	_			
	TOTAL SECTIONS CONSERVATIONS AND AND AND AND AND AND AND AND AND AND	and an experience of the second second second second second second second second second second second second se	nas visioninas a Antoninimo, minitorio, s. 11475 (1.816767) (2007) (3.707)	04 04 5 A 5
	edistrock dur p.e.c. p.e.c. p.e.c. p.e.c. p.e.c. p.e.c. p.e.c. p.e.c. p.e.c. p.e.c. p.e.c. p.e.c. p.e.c. p.e.c	Perkin Multi-Althoritos in occidente Presidente Presidente a proprieta (n. 1404 de 1441 de 1412 de 1414 de 141	pop yngsyspyrganganganganganasatacharlanhildin berkelind i dilaetis bistististist (1661 teist 1864 i 18	
8: List Certain Financial Account	s, Instruments, Safe Deposit	Boxes, and Storage	Units	
ithin 1 year before you filed for bankrup	tcv. were any financial accounts o	r instruments held in y	our name, or for your	benefit,
osed, sold, moved, or transferred?	.oy, word any mandrar addocume o	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, ••, ••, ••, ••, ••, ••, ••, ••, ••, •	,
clude checking, savings, money market,	, or other financial accounts; certi	ficates of deposit; sha	res in banks, credit un	ions,
okerage houses, pension funds, cooper	atives, associations, and other fir	ancial institutions.		
No				
Yes. Fill in the details.				
	Last 4 digits of account number	Type of account or	Date account was	Last balance befo
	As As	instrument	closed, sold, moved, or transferred	closing or transfe
Name of Financial Institution		☐ Checking		\$
Number Street		☐ Savings		
Mailiber oneer		Money market		
		☐ Brokerage		
City State ZIP Code		☐ Other	es establica e e e e e e e e e e e e e e e e e e e	
. The second of the second of	resolves and the state of the s	alengang , sa kara Salawa et alaut 1999 in	na drugi (a.) a na militaren errentziaka kitari eta errentziaka bilarrentziaka bilarrentziaka bilarrentziaka b	a a sassa mamaza sa am am a 1997-9
	XXXX-	Checking		\$
Name of Financial Institution		☐ Savings		,
Number Chron	-	Money market		
Number Street		☐ Brokerage		
	-	Othor.		
City State ZIP Code	•	Other		
	·		hay or other denositors	v for
o you now have, or did you have within	- 1 year before you filed for bankru		box or other depositor	y for
o you now have, or did you have within ecurities, cash, or other valuables?	- 1 year before you filed for bankru		box or other depositor	y for
o you now have, or did you have within	- 1 year before you filed for bankruլ		box or other depositor	y for
o you now have, or did you have within ecurities, cash, or other valuables?	1 year before you filed for bankrup Who else had access to it?		2.50	in a Do you si
o you now have, or did you have within ecurities, cash, or other valuables?		otcy, any safe deposit i	2.50	y for Do you st have it?
o you now have, or did you have within ecurities, cash, or other valuables?		otcy, any safe deposit i	2.50	Do you si have it?
o you now have, or did you have within ecurities, cash, or other valuables?		otcy, any safe deposit i	2.50	Do you st have it?
o you now have, or did you have within ecurities, cash, or other valuables? No Yes. Fill in the details.	Who else had access to it?	otcy, any safe deposit i	2.50	Do you si have it?
o you now have, or did you have within ecurities, cash, or other valuables? No Yes. Fill in the details.	Who else had access to it?	otcy, any safe deposit i	2.50	Do you si have it?

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El No	Last Name ge unit or place other than your home w	Case number (if known)	?
Yes. Fill in the details.	Who else has or had access to it?	Describe the contents	Do you st have it?
Name of Storage Facility	Name	pomonima de la compania de la compa	□ No □ Yes
Number Street	Number Street		La res
	City State ZIP Code		
City State ZIP	Code		
	Hold or Control for Someone Else		
or hold in trust for someone.	y that someone else owns? Include any	property you borrowed from, are storing fo	r,
Yes. Fill in the details.	Where is the property?	Describe the property	Value
Owner's Name			\$
Number Street	Number Street		
	City State 2	IP Code	
•	code	a 1 to the continuous and a superior	with the second of the second
hazardous or toxic substances, waincluding statutes or regulations c Site means any location, facility, or utilize it or used to own, operate, or Hazardous material means anythin substance, hazardous material, poport all notices, releases, and proceed any governmental unit notified	eral, state, or local statute or regulation of istes, or material into the air, land, soil, so ontrolling the cleanup of these substand r property as defined under any environi ir utilize it, including disposal sites. In an environmental law defines as a haz llutant, contaminant, or similar term.	mental law, whether you now own, operate,	m, or
☑ No ☑ Yes. Fill in the details.	Governmental unit	Environmental law if you know it	Date of notice
	Governmental triff	Environmental law, if you know it	Date of notice
Name of site	Governmental unit		-

City

State

ZIP Code

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First Name Middle Name L	ast Name	Case number (# known)	
ve you notified any governmental unit	of any release of hazardous mat	terial?	
No			
Yes. Fill in the details.			
	Governmental unit	Environmental law, if you know it	Date of notice
			<u> </u>
Name of site	Governmental unit		
Number Street	Number Street		a CC 45 CC Continues and an activity of
	City State ZIP Code		
City State ZIP Code			
A had a mark to an interest		$t \sim w_{\rm c}$, a samulation constant section of the section of the section $w_{\rm c} \sim t$	annam mermeraansa merenda amang p
	dministrative proceeding under	any environmental law? Include settlemen	ts and orders.
No Ven Ellin the detail			
Yes. Fill in the details.			
	Court or agency	Nature of the case	Status of the case
Case title			Vacc
	Court Name		Pending
			On appea
	Number Street		☐ Conclude
Case number	City State ZIP (Code	
	usiness or Connections to Ar	ny Business r have any of the following connections to a	
A sole proprietor or self-employed	l in a trade, profession, or other a	activity, either full-time or nart-time	iny pusiness r
A member of a limited liability con	pany (LLC) or limited liability pa	artnership (LLP)	
_			
□ A partner in a partnership			
 A partner in a partnership An officer, director, or managing e 	executive of a corporation		
□ A partner in a partnership	executive of a corporation	oration	
 □ A partner in a partnership □ An officer, director, or managing e □ An owner of at least 5% of the voti No. None of the above applies. Go to I 	executive of a corporation ing or equity securities of a corpo Part 12.		
□ A partner in a partnership□ An officer, director, or managing e□ An owner of at least 5% of the voti	executive of a corporation ing or equity securities of a corpo Part 12.		
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	Describe the nature of the business	Employer Identification number
Business Name		Do not include Social Security number or ITIN
Number Chart		EIN:
Number Street	Name of accountant or bookkeeper	Dates business existed
1	-	
City State ZIP Code		From To
thin 2 years before you filed for bankru titutions, creditors, or other parties.	ptcy, did you give a financial statement to a	nyone about your business? Include all financial
Yes. Fill in the details below.		
	Date issued	
Name	MM / DD / YYYY	
Number Street	•	
	-	
City State ZIP Code		
2: Sign Below		
iswers are true and correct. I understar	nd that making a false statement, concealing	and I declare under penalty of perjury that the g property, or obtaining money or property by frauc
connection with a bankruptcy case car U.S.C. §§ 152, 1341, 1519, and 3571.	n result in fines up to \$250,000, or imprison	ment for up to 20 years, or both.
Murhi wast	*	
Signature of Debtor 1	Signature of Debtor 2	
Date 07-18-16		
	Date Statement of Financial Affairs for Individuals	- Filling for Porture to Cofficial Forms 40710
	natement of Financial Analis for multiplicate	s Filling for Dankrupicy (Official Form 107)?
,		
No Yes		
No		
No Yes	o is not an attorney to help you fill out bank	ruptcy forms?